



STATE OF MAINE
Bureau of Insurance

34 State House Station
Augusta, ME
04333-0034

Certificate of Authority Preliminary Application

*This application form is not meant to replace the instructions in Regulation Chapter 230.
It is simply a tool to help us process your preliminary application in the most efficient and timely manner possible.*

1. Company name:		2. NAIC Company Code	
3. Company's statutory home address:			
4. Company's mailing address:			
5. Name of controlling entity:		6. Affiliated companies currently licensed in Maine:	
7. Contact person for preliminary filing:		8. Contact person's address:	

Kinds of insurance proposed to be written in Maine (Title 24-A M.R.S.A. §701, ET. SEQ.)

Life and Health

- ☐ 1. Life, Including Credit Life
- ☐ 2. Health, Including Credit Health
- ☐ 3. Variable Life
- ☐ 4. Variable Annuity

Property & Casualty

- | | |
|--|--|
| <input type="checkbox"/> 10. Fire | <input type="checkbox"/> 23. Products Liability |
| <input type="checkbox"/> 11. Allied Lines | <input type="checkbox"/> 24. Auto Liability |
| <input type="checkbox"/> 12. Farmowners Multiple Peril | <input type="checkbox"/> 25. Auto Physical Damage |
| <input type="checkbox"/> 13. Homeowners Multiple Peril | <input type="checkbox"/> 26. Aircraft (All Perils) |
| <input type="checkbox"/> 14. Commercial Multiple Peril | <input type="checkbox"/> 27. Fidelity |
| <input type="checkbox"/> 15. Mortgage Guaranty | <input type="checkbox"/> 28. Surety |
| <input type="checkbox"/> 16. Ocean Marine | <input type="checkbox"/> 29. Glass |
| <input type="checkbox"/> 17. Inland Marine | <input type="checkbox"/> 30. Burglary & Theft |
| <input type="checkbox"/> 18. Financial Guaranty | <input type="checkbox"/> 31. Boiler & Machinery |
| <input type="checkbox"/> 19. Medical Malpractice | <input type="checkbox"/> 32. Credit |
| <input type="checkbox"/> 20. Earthquake | <input type="checkbox"/> 33. Federal Flood Insurance |
| <input type="checkbox"/> 21. Workers' Compensation | <input type="checkbox"/> 40. Title |
| <input type="checkbox"/> 22. Other Liability | <input type="checkbox"/> 45. Road Club |

Be sure to include:

A copy of the company's most recent annual statement certified by domiciliary supervisory official.

A \$1,000 check made payable to Treasurer, State of Maine (filing fee).

A certified copy of the company's current Certificate of Compliance.

Your scoring per §3(C) of Regulation Chapter 230 (see back).

A score of 5 points is the minimum required for a full application to be entertained, except for those applicants which qualify for the alternative review procedure as provided in §3 (D)

1. Capital funds (capital and/or surplus) -- Statutory basis. Points: _____
(0 points if company does not meet minimum statutory requirements for common capital stock **and** unassigned funds pursuant to Title 24-A M.R.S.A. §410).
 2. NAIC Insurance Regulatory Information System (IRIS) Tests Points: _____
 3. Servicing considerations Points: _____
Location of intended service office or qualifying affiliate's service office.

If this an affiliate's office name affiliate _____
 4. Sales to Surplus Ratio Test
a. For P & C Companies:
Net Premiums Written Divided By "Determined" Surplus Points: _____
b. For Life & Health Companies:
Sum of Aggregate Reserves Divided By "Determined" Surplus Points: _____
 5. Incurred Loss Ratio Test for P & C Companies (Weighted Sum) Points: _____
 6. Incurred Loss Ratio Test for Health Companies Points: _____
 7. Profitability Test for Life Companies Points: _____
 8. Commitment to Underwriting Territory Points: _____
 9. Business Acquisition Considerations Points: _____
- Total Points:** _____